

UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF OHIO  
WESTERN DIVISION

IN RE:

Jenner, Scott and Christine

CASE NO.: 18-31568

JUDGE: Gustafson

Debtor(s)

**Amendment to Petition, Schedules, Creditor Matrix,  
Statement of Financial Affairs Pursuant to Bankruptcy Rule 1009**

The attachments hereto amend the following:

A/B  C  D  E/F

G  H  I  J  Summary of Schedules

Matrix  Statement of Financial Affairs

Other \_\_\_\_\_

Debtor(s) represent that the amendments attached contain full and true statements of facts set forth therein, as required by the provisions of Title 11 United States Code and Federal Bankruptcy Rules of Procedure and/or Local Bankruptcy Rules relating to the debtor.

Pursuant to Bankruptcy Rule 1008, Debtor(s) Jenner, Scott and Christine and \_\_\_\_\_  
certify under penalty of perjury that the foregoing is true and correct.

Executed on: 7/18/18

18/Christine Jenner  
Signature of Debtor

18/Scott Jenner  
Signature of Debtor

## CERTIFICATE OF SERVICE

(Service addresses for Creditors and Parties-in-Interest must be listed as per LBR 9013-3)

Pursuant to Bankruptcy Rule 1009(a), I certify that on this 18<sup>th</sup> day of July, 2018, a copy of this amendment, together with a copy of the Notice of Commencement of Case and Meeting of Creditors, was sent to the following additional creditors or original creditors with corrected addresses, United States Trustee and case Trustee at the addresses listed below or attached hereto:

Name: see attached matrix

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name: United States Trustee

Case Trustee: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

By: /s/ Andrea Henning

Signature of Pro Se Debtor or Attorney

- Original must be filed with the Clerk's Office. *Mandatory electronic filers* are required to submit this form and all amended attached documents via the Court's electronic filing system.
- Amendments adding creditors must be accompanied by a matrix listing only the creditor names and addresses being added. *Electronic filers must upload creditor address changes at time of filing.* See LBR 1007-2.
- **Amendments or changes to the matrix or list of creditors may require a filing fee.**

CreditorMatrix (3).txt

18-31568

ALLEN COUNTY DEPT OF JOB AND FAMILY SERVICES  
P.O. BOX 4506  
LIMA, OH 45802

BEST BUY CREDIT SERVICES  
PO BOX 78009  
PHEONIX, AZ 85062

CAPITAL ONE BANK  
P.O. BOX 6492  
CAROL STREAM, IL 60197

CHASE SLATE  
P.O. BOX 6294  
CAROL STREAM, IL 60197

COMENITY VICTORIA'S SECRET  
P.O. BOX 659450  
SAN ANTONIO, TX 78265

DISCOVER  
P.O. BOX 742655  
CINCINNATI, OH 45274

HONDA FINANCIAL SERVICES  
P.O. BOX 5308  
ELGIN, IL 60121

KOHLS  
PO BOX 2983  
MILWAUKEE, WI 53201

MY C UMORTGAGE  
3560 PENTAGON BOULEVARD  
SUITE 301  
BEAVERCREEK, OH 45431

OLD NAVY VISA/SYNCB  
P.O. BOX 960017  
ORLANDO, FL 32896

ORTHODONTICS ASSOCIATES  
260 S EASTOWN RD  
LIMA, OH 45807

SAM'S CLUB/SYNCHRONY BANK

Fill in this information to identify your case:		
Debtor 1	Cristine Elizabeth Jenner	
	First Name	Middle Name
Debtor 2 (Spouse, if filing)	Scott Allen Jenner	
	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the: Northern District of Ohio		
Case number (If known)	18-31568	

Check if this is an amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

#### Part 1: Summarize Your Assets

Your assets	
Value of what you own	
1. Schedule A/B: Property (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from Schedule A/B.....	\$ 48,000.00
1b. Copy line 62, Total personal property, from Schedule A/B.....	\$ 129,981.74
1c. Copy line 63, Total of all property on Schedule A/B.....	\$ 177,981.74

#### Part 2: Summarize Your Liabilities

Your liabilities	
Amount you owe	
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of Schedule D .....	\$ 55,233.57
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F .....	\$ 752.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	+ \$ 44,182.55
	<b>Your total liabilities</b>
	<b>\$ 100,168.12</b>

#### Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I .....	\$ 5,517.96
5. Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22c of Schedule J .....	\$ 5,449.18

Cristine Elizabeth Jenner

Debtor 1

First Name Middle Name Last Name

18-31568

Case number (if known)

## Part 4: Answer These Questions for Administrative and Statistical Records

## 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes

## 7. What kind of debt do you have?

Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the **Statement of Your Current Monthly Income**: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 6,899.62

## 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

## Total claim

## From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.)	\$ 0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ 752.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00
9d. Student loans. (Copy line 6f.)	\$ 0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00
<b>9g. Total.</b> Add lines 9a through 9f.	<b>\$ 752.00</b>

Fill in this information to identify your case:

Debtor 1	Cristine Elizabeth Jenner		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Scott Allen Jenner		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern District of Ohio			
Case number (If known)	18-31568		

Check if this is an amended filing

## Official Form 106E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

## Part 1: List All of Your PRIORITY Unsecured Claims

## 1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.  
 Yes.

## 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount
2.1	Allen County Dept Of Job And Family Services	\$ 752.00	\$ 752.00	\$ 0.00
	Priority Creditor's Name P.O. Box 4506	Last 4 digits of account number		
	Number Street	When was the debt incurred?		
	Lima OH 45802	As of the date you file, the claim is: Check all that apply.		
	City State ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.2	Priority Creditor's Name	Last 4 digits of account number	\$	\$
	Number Street	When was the debt incurred?		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	Type of PRIORITY unsecured claim:		
	<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify		
	Is the claim subject to offset?			
	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			

Debtor 1

Cristine Elizabeth Jenner

First Name Middle Name Last Name

18-31568  
Case number (if known)

## Part 2: List All of Your NONPRIORITY Unsecured Claims

## 3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

## 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Best Buy Credit Services

Total claim

4.1

Nonpriority Creditor's Name

Po Box 78009

Number Street

Last 4 digits of account number 9498

\$ 355.17

When was the debt incurred?

Phoenix AZ 85062

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card Debt

## Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

 Check if this claim is for a community debt

## Is the claim subject to offset?

 No Yes

4.2

Capital One Bank

Last 4 digits of account number 8633

\$ 1,670.72

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card Debt

Nonpriority Creditor's Name

P.O. Box 6492

Number Street

Carol Stream IL 60197

City State ZIP Code

## Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

 Check if this claim is for a community debt

## Is the claim subject to offset?

 No Yes

4.3

Capital One Bank

Last 4 digits of account number 9846

\$ 1,380.03

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card Debt

Nonpriority Creditor's Name

P.O. Box 6492

Number Street

Carol Stream IL 60197

City State ZIP Code

## Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

 Check if this claim is for a community debt

## Is the claim subject to offset?

 No Yes

Debtor 1 Cristine Elizabeth Jenner  
 First Name Middle Name Last Name

Case number (if known) 18-31568

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.**

			Total claim		
4.4	<p>Chase Slate</p> <p>Nonpriority Creditor's Name P.O. Box 6294 Number Street</p> <p>Carol Stream IL 60197 City State ZIP Code</p> <p><b>Who incurred the debt? Check one.</b></p> <p><input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>			<p>Last 4 digits of account number 2859 When was the debt incurred?</p> <p><b>As of the date you file, the claim is: Check all that apply.</b></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify Credit Card Debt</p>	<b>\$ 2,464.45</b>
4.5	<p>Comenity Victoria's Secret</p> <p>Nonpriority Creditor's Name P.O. Box 659450 Number Street</p> <p>San Antonio TX 78265 City State ZIP Code</p> <p><b>Who incurred the debt? Check one.</b></p> <p><input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>			<p>Last 4 digits of account number 9528 When was the debt incurred?</p> <p><b>As of the date you file, the claim is: Check all that apply.</b></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify Credit Card Debt</p>	<b>\$ 1,014.22</b>
4.6	<p>Discover</p> <p>Nonpriority Creditor's Name P.O. Box 742655 Number Street</p> <p>Cincinnati OH 45274 City State ZIP Code</p> <p><b>Who incurred the debt? Check one.</b></p> <p><input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>			<p>Last 4 digits of account number 5784 When was the debt incurred?</p> <p><b>As of the date you file, the claim is: Check all that apply.</b></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify Credit Card Debt</p>	<b>\$ 13,036.76</b>

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.7	Discover	Nonpriority Creditor's Name P.O. Box 742655 Number Street	Last 4 digits of account number 9050	\$ 11,320.32
Cincinnati OH 45274 City State ZIP Code			When was the debt incurred? _____	
<p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>				
<p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>			<p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify Credit Card Debt</p>	
4.8	Kohls	Nonpriority Creditor's Name PO Box 2983 Number Street	Last 4 digits of account number 3709	\$ Unknown
			When was the debt incurred? _____	
<p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify</p>				
4.9	Old Navy Visa/Syncb	Nonpriority Creditor's Name P.O. Box 960017 Number Street	Last 4 digits of account number 0180	\$ 1,837.79
			When was the debt incurred? _____	
<p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify Credit Card Debt</p>				

Debtor 1

Cristine Elizabeth Jenner

First Name Middle Name Last Name

18-31568  
Case number (if known)

## Part 2: List All of Your NONPRIORITY Unsecured Claims

## 3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

## 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

	Orthodontics Associates	Total claim	
		Last 4 digits of account number	\$ 5,238.25
4.10	<p>Nonpriority Creditor's Name 260 S Eastown Rd Number Street</p> <p>Lima OH 45807 City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p><b>When was the debt incurred?</b></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify Orthodontia</p>	
4.11	<p>Sam's Club/Synchrony Bank</p> <p>Nonpriority Creditor's Name Po Box 530942 Number Street</p> <p>Atlanta GA 30353 City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 5833 \$ 484.94</p> <p><b>When was the debt incurred?</b></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify Credit Card Debt</p>	
4.12	<p>Sprint</p> <p>Nonpriority Creditor's Name PO Box 4191 Number Street</p> <p>Carol Stream IL 60197 City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 3550 \$ Unknown</p> <p><b>When was the debt incurred?</b></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify Telephone / Internet services</p>	

## Part 2: List All of Your NONPRIORITY Unsecured Claims

## 3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

## 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

## 4.13 Synchrony Bank/Ashley

Nonpriority Creditor's Name

P.O. Box 960061

Number Street

Orlando FL 32896  
City State ZIP Code

## Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

 Check if this claim is for a community debt

## Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number 3601

\$ 870.00

When was the debt incurred?

## As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card Debt

## 4.14 Synchrony Bank/Jcp

Nonpriority Creditor's Name

P.O. Box 960090

Number Street

Orlando FL 32896  
City State ZIP Code

## Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

 Check if this claim is for a community debt

## Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number 1611

\$ 1,480.46

When was the debt incurred?

## As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card Debt

## 4.15 Tjx Rewards/Synch

Nonpriority Creditor's Name

Po Box 530948

Number Street

Atlanta GA 30353  
City State ZIP Code

## Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

 Check if this claim is for a community debt

## Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number 7325

\$ 165.35

When was the debt incurred?

## As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card Debt

## Part 2: List All of Your NONPRIORITY Unsecured Claims

## 3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

## 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

## 4.16 Walmart/Synchrony Bank

Nonpriority Creditor's Name

P.O. Box 530927

Number Street

Atlanta GA 30353  
City State ZIP Code

## Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

## Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number 2121

\$ 1,105.30

When was the debt incurred?

## As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card Debt

## 4.17 Wells Fargo Home Furnishings

Nonpriority Creditor's Name

P.O. Box 71118

Number Street

Charlotte NC 28272  
City State ZIP Code

## Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

## Check if this claim is for a community debt

## Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number 4930

\$ 1,758.79

When was the debt incurred?

## As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card Debt

Nonpriority Creditor's Name

Number Street

City State ZIP Code

## Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

## Check if this claim is for a community debt

## Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number

\$

When was the debt incurred?

## As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify

## Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Sprint

Name \_\_\_\_\_

PO Box 629023

Number Street \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.12 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

El Dorado Hills	CA	95762
City	State	ZIP Code

Last 4 digits of account number 3550

Name \_\_\_\_\_

Number Street \_\_\_\_\_

City	State	ZIP Code
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On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

Name \_\_\_\_\_

Number Street \_\_\_\_\_

City	State	ZIP Code
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On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

Name \_\_\_\_\_

Number Street \_\_\_\_\_

City	State	ZIP Code
------	-------	----------

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

Name \_\_\_\_\_

Number Street \_\_\_\_\_

City	State	ZIP Code
------	-------	----------

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

Name \_\_\_\_\_

Number Street \_\_\_\_\_

City	State	ZIP Code
------	-------	----------

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

Name \_\_\_\_\_

Number Street \_\_\_\_\_

City	State	ZIP Code
------	-------	----------

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

Debtor 1

Cristine Elizabeth Jenner

First Name Middle Name Last Name

Case number (if known) 18-31568

Part 4:

## Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.  
Add the amounts for each type of unsecured claim.

Total claims from Part 1

6a. Domestic support obligations  
6b. Taxes and certain other debts you owe the government  
6c. Claims for death or personal injury while you were intoxicated  
6d. Other. Add all other priority unsecured claims.  
Write that amount here.

6a. \$ 0.00  
6b. \$ 752.00  
6c. \$ 0.00  
6d. + \$ 0.00

6e. Total. Add lines 6a through 6d.  
\$ 752.00

Total claims from Part 2

6f. Student loans  
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
6h. Debts to pension or profit-sharing plans, and other similar debts  
6i. Other. Add all other nonpriority unsecured claims.  
Write that amount here.

6f. \$ 0.00  
6g. \$ 0.00  
6h. \$ 0.00  
6i. + \$ 44,182.55

6j. Total. Add lines 6f through 6i.  
\$ 44,182.55

Fill in this information to identify your case:

Debtor 1	<b>Cristine Elizabeth Jenner</b>	
	First Name	Middle Name
Debtor 2	<b>Scott Allen Jenner</b>	
(Spouse, if filing)	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the Northern District of Ohio		
Case number (if known)	<b>18-31568</b>	

Check if this is an amended filing

## Official Form 106Dec

## Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_ . Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

/s/ Cristine Elizabeth Jenner

Signature of Debtor 1

Date 07/18/2018  
MM / DD / YYYY

/s/ Scott Allen Jenner

Signature of Debtor 2

Date 07/18/2018  
MM / DD / YYYY